DOCUMENT RESUME

ED 383 436 PS 023 273

AUTHOR Droege, Kristin L.
TITLE Identifying Preschool Caregivers' Beliefs about Children's Social Development. Brief Report.
INSTITUTION Milken Family Foundation, Beverly Hills, CA.
PUB DATE Dec 94
NOTE 17p.
PUB TYPE Reports - Research/Technical (143)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Attitude Measures; Attribution Theory; *Beliefs; *Child Caregivers; *Child Development; Constructivism (Learning); *Developmental Psychology; *Factor Analysis; Learning Theories; Preschool Children; Preschool Education; Preschool Teachers; Social Development

ABSTRACT

This study examined the assumption that all caregivers have a set of beliefs which represent their own underlying theory of child development and tested one strategy for identifying the beliefs that preschool caregivers hold. In order to classify caregivers' beliefs about children's social development, an adaptation of McGillicudy-DeLisi's (1992) Parent Belief Questionnaire called the Social Development Beliefs Questionnaire (SDBQ) was completed by 473 caregivers from 104 centers. A factor analysis was performed on the seven theoretical subscales of the questionnaire, which included psychoanalytic theory, biological model of development, gender model of development, constructivist theory, attribution theory, social learning theory, and operant theory. Caregivers' levels of education were also examined. The results of the study indicated no support for the hypothesis that child caregivers' beliefs about social development can be classified in a manner consistent with psychological theories of social development. Tables for items on SDBQ, factors produced by directors' responses to SDBQ, and caregivers' levels of education are included. (WP)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
X This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

ED 383 436

BRIEF REPORT:

Identifying Preschool Caregivers' Beliefs About Children's Social Development

Kristin L. Droege

Milken Family Foundation

December, 1994

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
Kristin L. Droege
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

Running Head: IDENTIFYING BELIEFS

Many thanks to Carollee Howes whose guidance made this project possible and to Aimée Dorr and Deborah Stipek for their significant input on earlier versions of this project. This paper is currently in review. Please do not cite without prior written permission of the author. Requests for reprints can be sent to Kristin L. Droege, Milken Family Foundation, 1250 4th Street, Suite 200, Santa Monica, CA 90401-1353.

PS 023273

BEST COPY AVAILABLE

ABSTRACT

This study was based on the assumption that all caregivers have a set of beliefs which represent their own underlying theory of child development. It was designed to test one strategy for identifying the beliefs that preschool caregivers hold. Four hundred seventy three (473) caregivers from 104 centers made up the sample for this study. In order to classify caregivers' beliefs about children's social development an adaptation of McGillicudy-DeLisi's (1992) Parent Belief Questionnaire was completed by all caregivers. A factor analysis with principle axis factoring and varimax rotation was performed on the seven theoretical subscales of the questionnaire. A single factor, which accounted for 49.9 percent of the variance was produced on which all seven scales loaded at .64 or higher. The factor was theoretically meaningless. This result is contrary to results found using this measure with other samples. Implications are discussed.

BRIEF REPORT:

Identifying Preschool Caregivers' Beliefs About Children's Social Development

Caregivers in child care centers use a wide variety of strategies to help the children in their care get along with their peers. When an adult uses a particular strategy it reflects the adult's underlying beliefs and assumptions about how children learn and how adults assist in that learning process (McGillicudy-DeLisi, 1992). This study was based on the assumption that all caregivers have a set of beliefs which represent their own underlying theory of child development. It was designed to test one strategy for identifying the beliefs that preschool caregivers hold. If it is possible to identify caregivers' beliefs about child development it would assist us in the study of teacher training and education, understanding links and inconsistencies between beliefs and behaviors, and the impact of an individual's environment and experiences on the formation of their beliefs.

There are many theories of behavior popular today among child development researchers. Each theory suggests a way in which children might develop social skills during the preschool years. In a recent study, McGillicudy-DeLisi (1992) examined parents' agreement with seven different theories or models of children's social development. The present study examined caregivers' agreement with these same seven theories. The seven theories included were Social Learning Theory, Operant Theory, Psychoanalytic Theory (Freudian), Constructivist Theory, Attribution Theory, a Biological Model of Development, and a Gender Model of Development.

METHOD

Subjects

Four hundred seventy three (473) caregivers from 104 centers made up the sample for this study. The sample was part of a larger study examining ecological precursors of caregivers' beliefs. All caregivers were lead teachers in child care center classrooms. The caregivers came from child care centers in the greater Los Angeles area. Originally, twelve hundred (1200) centers were selected randomly from a list of all licensed, full-day, full-year centers located in Los Angeles county. Each center director was sent a letter describing the study and requesting participation. One hundred eighty seven (187) centers volunteered to take part and were mailed a packet which included questionnaires for all head teachers and the director. The packet also included privacy envelopes for each questionnaire to insure confidentiality of the respondent within the center, and a stamped envelope for returning all materials. Follow up calls were required to get the questionnaires returned in some cases. Data was returned by 112 centers with 493 teachers. Twenty (20) teachers from eight (8) centers were dropped from the sample because of failure to complete the primary questionnaire.

Measures

Social Development Beliefs Questionnaire

In order to classify caregivers' beliefs about children's social development an adaptation of McGillicudy-DeLisi's (1992) Parent Belief Questionnaire was completed by all caregivers. Subjects read 53 statements representing seven different theories of child development. Subjects scored each statement on a 1 to 6 Likert-type scale to indicate their level of agreement

with the statement. The headings on the Likert-scale were changed from the original measure to encourage greater variance in caregiver scoring. In addition, six of the statements from the DeLisi measure were phrased more firmly. All changes involved the removal of qualifying statements. See Table 1 for a copy of the items in this measure.

Insert Table 1 about here

The measure was originally piloted for this study on 113 undergraduate psychology students. A factor analysis indicated that the measure might be expected to produced four factors which were theoretically meaningful. The first factor represented Constructivist and Attribution theories combined, the second factor was Social Learning theory, the third factor was Psychoanalytic theory, and the fourth factor was Biological theory. Operant theory and the Gender model dropped out.

RESULTS

Caregivers in the study represented a range of backgrounds in their personal lives, the centers in which they worked, and the classrooms in which they functioned as caregivers. Caregiver responses to the Social Development Beliefs Questionnaire were examined. A factor analysis with principle axis factoring and varimax rotation was performed on the Social Development Beliefs Questionnaire. Seven subscales were created, each including the statements for one of the seven psychological theories. Six of the scales had their highest reliability (alpha=.70 or higher) when all of the original items were included. The seventh theory, gender theory, had its

highest alpha=.70 when one item was dropped. A factor analysis with principle axis factoring and varimax rotation was performed on the seven subscales. A single factor, which accounted for 49.9 percent of the variance was produced on which all seven scales loaded at .64 or higher. The factor was theoretically meaningless.

In order to address the possibility that the lack of variance in caregivers' ratings on the Social Development Beliefs Questionnaire was due to a response bias in which caregivers restricted their responses to a limited section of the six-point scale, deviation scores were created. A deviation score was created by taking the difference between the rating given a single item by a caregiver and that caregiver's mean rating across all 53 items on the questionnaire. A factor analysis with principle axis factoring and varimax rotation was attempted on the seven subscales of the questionnaire using the deviation scores but was not successful due to the high correlation among the seven scales.

Using this measure, preschool caregivers' beliefs about children's social development cannot be classified or grouped according to their agreement with developmental theory. It is interesting, however, that this measure was able to produce meaningful factors both when used with parents, in the study by McGillicudy-DeLisi (1992), and, in the pilot study, when used with undergraduate developmental psychology students. In addition, the measure was used in the current study to obtain information about child care directors' beliefs as a predictor of caregivers' beliefs. Thus, 104 child care directors' completed the questionnaire. This set of responses was used in a factor analysis with principle axis factoring and varimax rotation on the seven theoretical subscales. Two factors were produced, which resembled those in

McGillicudy-DeLisi's study, and which accounted for 49% of the variance. See Table 2. The first factor included psychoanalytic theory, biological theory, and

---

Insert Table 2 about here

---

the gender model, and accounted for 40% of the variance. The second factor included constructivist, attribution, and social learning theory, and accounted for 9% of the variance. Operant theory loaded on both factors. This factor analysis had a result extremely similar to that of McGillicudy-DeLisi in her study of parents.

Caregivers' level of education was examined due to the fact that the measure is rather sophisticated and abstract both in its nature and its wording. McGillicudy-DeLisi's subjects were white, upper-middle class parents who, on average, were college graduates. Subjects in the pilot study were all students at UCLA. Child care directors, in a national sample, tended to have higher educational levels than did caregivers (Whitebook, Howes, & Phillips, 1990). However, McGillicudy-DeLisi's measure is geared toward the college level, as items in it were generated originally from college level text books. Out of the current sample of preschool caregivers over 95% had some college experience. See Table 3. In fact, in the state of California caregiver certification requires

---

Insert Table 3 about here

---

some college level education. Over 65% of the sample had a two-year degree or more, and 40% had a four-year degree or some graduate level education. A subsample of preschool caregivers (N=315) was selected, all of whom had an Associates Degree or higher level of education. However, the factor analysis

still produced a single theoretically meaningless factor. This sample was clearly capable of understanding the abstract nature of the questions. Other explanations for their unusual response pattern should be examined.

DISCUSSION

The results of this study show no support for the hypothesis that child care caregivers' beliefs about social development can be classified in a manner consistent with psychological theories of social development based on the measure utilized. In fact, it appears that caregivers have very high levels of agreement with a wide range of theories, some of which are, at times, even contradictory. This is in contrast to other sample groups, including parents, college students, and child care directors, who do appear to differentiate between different sets of theories.

Since caregivers interact with children in so different a way than theorists and, thus, gain their knowledge of child development differently than theorists, it is possible that caregivers conceive of children's development in a way which is unlike developmental psychologists. If this is true, then asking caregivers to map developmental theory onto their understanding could produce an end result which is theoretically meaningless, as we have seen. It could also be argued that because caregivers interact in such a personal and social way with such a large number of children that they have seen the "exception to every rule" and thus have more trouble forming a consistent theory of their own about children's social development. When a caregiver has so much intense and personal experience with so many children it may become difficult to step back and see patterns of behavior or development across a group which seems so varied.

This conclusion could indicate reason for concern. It is hoped that caregivers of young children have some broader sense of child development and behavior which filters their experiences and guides their behavior. Without this sense, caregivers could only react to children's behavior based on their emotional reaction of the moment.

Another interpretation of the results might be that caregivers break down social development into more meaningful pieces for the settings in which they interact with children. For instance, caregivers may not think about how well a child "interacts with peers" in the broad general sense that developmentalists do. Instead, a caregiver might consider how well the child can play with a group of children at the manipulative table during morning free play. This skill may be seen as quite independent of the child's ability to negotiate the sharing of the tricycles on the playground during afternoon free play. Again, caregivers' experiences may influence not only what they think about but the way in which they conceptualize children's social development.

Finally, it may be that the lack of variance in caregivers' responses on the questionnaire indicates that caregivers utilize many theories in attempting to explain and understand child development and behavior. Even within the field of developmental psychology it is acknowledged that all theories have strengths and weaknesses and that no single theory adequately explains all behavior. This may be particularly true for caregivers, who interact with children across many differing activities and observe them in multiple relationships and situations. The more the caregiver is exposed to the many different experiences, behaviors, and reactions of all the children in their care, the less likely they might be to believe that one theory adequately explains or makes sense of the many children for whom they care.

An understanding of preschool caregivers' beliefs about children's social development would assist in understanding caregiver behavior and designing and implementing caregiver education and training programs. Since beliefs are considered to be the mediating factor between ecological factors and caregiver behavior, understanding them could clarify caregivers' decision making processes regarding caregiving behaviors and choices. Further work is necessary to develop a measure which is capable of revealing the underlying theories of child care caregivers.

References

McGillicudy-DeLisi, A. (1992). Parents' beliefs and children's personal-social development. In I. Sigel, A. McGillicudy-DeLisi, & J. Goodnow (Eds.), Parental belief systems: The psychological consequences for children (2nd ed.) (pp. 115-142). Hillsdale, NJ: Erlbaum.

Whitebook, M., Howes, C., & Phillips, D. (1990). Who cares? Child care teachers and the quality of care in America. Final report of the National Child Care Staffing Study; Child Care Employee Project.

Table 1

Items on Social Development Beliefs Questionnaire

---

1. Children are aggressive, but learn self-control through their parent's enforcement of social values.
2. Differences in personality or social development are biologically rooted.
3. Sex hormones are important in producing differences in boys' and girls' behaviors.
4. Children's ability to interpret other people's personalities and actions increases with age.
5. Little girls want to be like their mothers and little boys want to be like their fathers.
6. Experiences that are just a little more advanced than the child's current level of understanding provide "food for thought" for the child.
7. Children's early ideas about people and relationships change because of experiences that contradict those ideas.
8. Children learn that being kind and nice to others brings its own rewards.
9. Some children are more sociable than others by nature.
10. Children generate their own ideas about appropriate behavior for males and females.
11. Children's preferences for certain kinds of toys and activities develop no matter how they are raised.
12. Children learn that certain behaviors are appropriate through their close observation of adults.
13. Children imitate people whom they admire.
14. Children's feelings of pride or failure determine whether they will try new activities or ideas.
15. Praise helps develop pleasant behavior and personality in a child.
16. children develop ideas about social relationships through play with their peers.
17. Children conclude that they are a certain type of person by comparing their behavior to that of other people.

18. Children show the personality traits they are told they possess.
19. Children reach a stage where they want to be like their mothers or like their fathers.
20. Personality is inborn.
21. Children mentally organize their experiences to make sense out of their social world.
22. Girls like different toys and activities than boys.
23. Children will copy other children who are successful or are rewarded for their performance.
24. Children take in what they see and the behavior occurs later in play or interactions with other people.
25. Children will copy complex behaviors of others simply because it is fun.
26. Children formulate ideas that help them explain and predict events in their world.
27. Children's behavior is guided by the consequences they anticipate for their actions.
28. Children learn social behaviors because they imitate grown men and women.
29. Time-out (i.e., removing the child to a quiet place) teaches that certain behaviors will not be allowed or rewarded.
30. Direct rewards and punishments are responsible for children's knowledge of appropriate conduct.
31. Children's social and personality development depends on the child's level of thinking about their social experiences.
32. Children create theories about themselves and others in order to make sense out of what they see.
33. Children, as they grow, develop an appreciation that other people have perspectives and feelings different from their own.
34. Children have basic drives that they need to learn to control.
35. Without adult controls, children would be naturally wild and unruly.
36. Almost from birth, differences in children's personalities can be seen.
37. Children learn that certain behaviors are appropriate for girls and others are appropriate for boys by watching adults.

38. Children learn masculine and feminine behavior through imitation of men and women.
39. As children have social experiences, they form and revise their conceptions of themselves.
40. Children form ideas about the kind of person they are based on judgments about other people's behavior toward them.
41. Children identify with a parent because they perceive that parent as powerful.
42. Children will behave toward others the same way they see their parents behave toward others.
43. A child's behavior is caused by inner forces of which they are not aware.
44. Children behave well to please their parents and other authorities.
45. Firm enforcement that backs up rules leads to good behavior.
46. Children differ in their inborn motivation to master activities or ideas.
47. Children first develop a close relationship with their mothers and later with their fathers.
48. Unacceptable behaviors cease if rewards or privileges are taken away when those behaviors occur.
49. Children seek explanations for other people's behavior.
50. Sex hormones play a role in differences in children's behavior.
51. Boys are more active than girls from birth.
52. A child who expects to succeed is more likely to do well than a child who expects to do poorly.
53. Personality characteristics have a strong genetic component.

Table 2
Factors produced by directors' responses to Social Development Beliefs Questionnaire

Theoretical Subscale	Factor 1	Factor 2
Psychoanalytic	.79003	-.06986
Gender	.71886	.12854
Biological	.71833	-.05211
Social Learning	.01846	.83359
Attribution	-.04363	.66208
Constructivist	.06326	.56739
Operant	.40342	.21223
Percent Var.	40.1	9.5

Table 3
Caregivers'. level of education

Level of Education	N	%
Some High School	1	.2
High School Grad./GED	12	2.5
Some college	137	29.0
2 year degree	122	25.8
4 year degree	106	22.4
More than 4 year degree	87	18.4
Missing	8	1.7
TOTAL	473	100.0